

12-01-00

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PTO/SB/05 (08-00)

Approved for use through 10/31/2002. OMB 0851-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Please type a plus sign (+) inside this box 
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	YOR9-2000-0606US1 (8728-422)
First Inventor	ERICKSON
Title	METHOD AND SYSTEM FOR MARKETPLAC
Express Mail Label No.	EL599449895US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 25]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 4]
5. Oath or Declaration [Total Pages]
 - a. ☐ Newly executed (original or copy)
 - b. ☐ Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 17 completed)
 - i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s)
named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
 - a. ☐ Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. ☐ CD-ROM or CD-R (2 copies); or
 - ii. ☐ paper
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement of Power of Attorney (when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. ☐ Other:

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☒ Continuation-in-part (CIP)of prior application No. 09 / 662,499

Prior application information:

Examiner:

Group / Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS☐ Customer Number or Bar Code Label

(insert Customer No. or Attach bar code label here)

or ☐ Correspondence address below

Name	Frank Chau, Esq.				
Address	F. CHAU & ASSOCIATES, LLP				
	1900 Hempstead Turnpike, Suite 501				
City	East Meadow	State	New York	Zip Code	11554
Country	USA	Telephone	516-357-0091	Fax	516-357-0092

Name (Print/Type)	Frank Chau	Registration No. (Attorney/Agent)	34,136
Signature			Date <u>1/30/00</u>

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Assistant Commissioner for Patents
Washington, D.C. 20231
Sir:

ATTORNEY DOCKET: YOR9-2000-0606US1 (8728-422)
Date: November 30, 2000
Express Mail Label: EL599449895US
Date of Deposit: November 30, 2000

10886 U.S. PTO
09/727079
11/30/00

Transmitted herewith for filing is the Patent Application of:

Inventors: Thomas D. Erickson, Peter K. Malkin

For: METHOD AND SYSTEM FOR MARKETPLACE SOCIAL PROXIES

Enclosed are: [X] 19 sheets of specification; [X] 1 sheet(s) of Abstract; [X] 5 sheet(s) of claims; [X] 4 sheet(s) of drawing(s);

[] An assignment of the invention to International Business Machines Corporation with Recordation Form.

[] Declaration and Power of Attorney.

[] A certified copy of a _____ application, from which priority under Title 35 USC §119 is claimed.

[] Associate Power of Attorney.

The filing fee has been calculated as shown below:

(Col. 1)		(Col. 2)	OTHER THAN A SMALL ENTITY	
FOR:	NO. FILED	NO. EXTRA	RATE	FEE
BASIC FEE				\$710.00
TOTAL CLAIMS	24 -20 =	4	X \$18 =	72.00
INDEP CLAIMS	3 -3 =	0	X \$80 =	0
MULTIPLE DEPENDENT CLAIMS PRESENTED			+ 270 =	
			TOTAL	\$ 782.00

If the difference in Col. 1 is less than zero, enter "0" in Col. 2.

[] A check in the amount of \$_____ to cover the [] filing fee(s), [] recording fee is enclosed.

[X] Please charge my Deposit Account No. 50-0510/IBM (Yorktown Heights) in the amount of \$782.00.

[X] The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0510/IBM (Yorktown Heights). A duplicate copy of this sheet is enclosed.

[X] Any additional filing fees required under 37 CFR 1.16.

[X] Any patent application processing fees under 35 CFR 1.17.

Respectfully submitted,

By:

Frank Chau
Registration No. 34,136

Attorney for:

Please address all
correspondence to:

F. CHAU & ASSOCIATES, LLP
1900 Hempstead Tpke., Suite 501
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Fax: (516) 357-0092

IBM Corporation
Intellectual Property Law Dept.
P.O. Box 218
Yorktown Heights, NY 10598

CERTIFICATION UNDER 37 C.F.R. §1.10

I hereby certify that this Application transmittal and documents referred to as enclosed are being deposited with the United States Postal Service on this date November 30, 2000 in an envelope as "Express Mail Post Office to Addressee" Mailing Label Number EL599449895US addressed to: Assistant Commissioner for Patents, Box Patent Application, Washington, D.C. 20231.

Frank Chau

JC886 U.S. PTO
 09/727079

 11/30/00

PTO/SB/17 (09-00)
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FEE TRANSMITTAL

for FY 2001

Patent fees are subject to annual revision.

Complete if Known

Application Number	
Filing Date	November 30, 2000
First Named Inventor	Thomas D. Erickson
Examiner Name	
Group Art Unit	
Attorney Docket No.	YOR9-2000-0606US1 (8728-422)

TOTAL AMOUNT OF PAYMENT	(\$)	782.00
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METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to

Deposit Account Number	50-0510/IBM
Deposit Account Name	IBM/Yorktown Heights

- ☒ Charge Any Additional Fee Required
Under 37 CFR 1.16 and 1.17
- ☐ Applicant claims small entity status
See 37 CFR 1.27

2. ☐ Payment Enclosed:

☐ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
101	710	201	355	Utility filing fee	710
106	320	206	160	Design filing fee	
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	

SUBTOTAL (1)	(\$)	710.00
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2. EXTRA CLAIM FEES

		Extra Claims		Fee from below	Fee Paid
Total Claims	24	-20** =	4	18	72
Independent Claims	3	-3** =	0	80	0
Multiple Dependent				270	

Large Entity		Small Entity		Fee Description
Fee Code (\$)	Fee	Fee Code (\$)	Fee	
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)	(\$)	72.00
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***or number previously paid, if greater; For Reissues, see above*

FEE CALCULATION (continued)


3. ADDITIONAL FEES

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	390	216	195	Extension for reply within second month	
117	890	217	445	Extension for reply within third month	
118	1,390	218	695	Extension for reply within fourth month	
128	1,890	228	945	Extension for reply within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,240	241	620	Petition to revive - unintentional	
142	1,240	242	620	Utility issue fee (or reissue)	
143	440	243	220	Design issue fee	
144	600	244	300	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	240	126	240	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))	
179	710	279	355	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	
Other fee (specify) _____					

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3)	(\$)	0
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SUBMITTED BY

Name (Print/Type)	Frank Chau	Registration No. (Attorney/Agent)	34,136	Telephone	(516) 357-0091
Signature				Date	11/30/00

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